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CONNECTCARE

St. Louis ConnectCare cuts more than half of its staff



6 HOURS AGO • BY JIM DOYLE JDOYLE@POST-DISPATCH.COM 314-340-8372

ST. LOUIS • St. Louis ConnectCare, one of the area's leading providers of outpatient specialty medical services for the poor, issued layoff notices Wednesday to more than half of its staff.

The layoffs of 88 employees, from nurses to medical assistants and customer service personnel, will take effect in 60 days, said Melody Eskridge, president and chief executive of ConnectCare.

In addition, an unspecified number of physicians who contract to provide services to ConnectCare patients will no longer see patients there. Eleven ConnectCare employees also received their pink slips last week.

Eskridge said the job eliminations were necessary for financial reasons and comprised a major reorganization in which ConnectCare will no longer provide outpatient specialty appointments but will continue to operate its urgent care center on Delmar Boulevard as well as provide radiology services and conduct community health visits.

ConnectCare, a nonprofit organization, has been situated on the former Delmar campus of the St. Louis Regional Medical Center since 1998. As one of the city's key safety net institutions, ConnectCare has provided outpatient specialty services for the past 15 years to a disproportionate share of the St. Louis area's uninsured and underinsured.

“For me personally, it hurts,” Eskridge said. “I’ve seen the good work that was done. I’ve talked to patients over and over who told us, ‘If you weren’t here we don’t know what we’d do.’ In that respect, I pray that everyone has a place to get the care that they need.”

She said that ConnectCare provided more than 18,000 specialty visits in the fiscal year ending June 2013. Sixty percent of those patients were uninsured, and about 23 percent were in the federal-state Medicaid program for the poor. With so many poor patients, ConnectCare was unable to shift its costs to those with private insurance.

In contrast, only a small percentage of physicians specialty care appointments at the area’s two largest safety net providers — Washington University and SLUCare physicians groups — involve the uninsured: about 3 percent for Washington University; and about 5 percent for SLU Care, according to the [St. Louis Regional Health Commission](#).

About 21 percent of outpatient specialty services in 2011 at Barnes-Jewish Hospital — the area’s third-largest safety net institution — were for the uninsured, and an additional 43 percent involved Medicaid patients.

ConnectCare offers appointments for patients in various specialties, from general surgery to orthopedics, cardiology and neurology. For those without insurance, patient fees are based on a patient’s ability to pay.

In addition, ConnectCare’s Smiley Urgent Care Center served about 16,000 patients last year, and its radiological services unit provided care to about 12,000 patients.

Eskridge said that ConnectCare was working with the St. Louis Regional Health Commission and other local health providers and city officials to schedule appointments for specialty services for the uninsured.

She blamed ConnectCare’s dwindling cash supply on a mix of federal and state budget cuts for health care for the uninsured, the Missouri Legislature’s decision not to expand the state’s Medicaid program and the difficulty of enrolling uninsured patients in a federal pilot program.

“Eventually, with Medicaid not expanding, it was still a conversation we were going to have,” Eskridge said, “because without Medicaid expansion, money to serve the uninsured and underinsured was going to dry up.”

“This is the day the rhetoric becomes real,” said Robert Fruend, executive director of the St. Louis Regional Health Commission. “Without Medicaid expansion, we will start losing capacity in our medical institutions particularly in those that serve our most vulnerable populations. We will continue to see layoffs and access reductions in the rural areas, the urban areas and institutions that serve the mentally ill, until we expand Medicaid.”

Fruend said that government cutbacks in health care for the poor would accelerate in 2014. “There are hundreds of millions of dollars that are being pulled out of the system, and the (health) providers simply can’t provide care to our most vulnerable populations,” he said.

ConnectCare’s roots date to the closing of the city-and-county operated St. Louis Regional Medical Center in the late 1990s. In 1998, BJC Healthcare — the St. Louis area’s largest nonprofit health system — agreed to help manage ConnectCare during its first five years; BJC stepped back from the fledgling organization in 2003.

However, representatives from the St. Louis area’s major nonprofit health providers — including BJC Healthcare, SSM Health Care, Mercy Health and Washington University — sit on ConnectCare’s board of directors.

ConnectCare has suffered physician turnover in recent years, and its portion of the local specialty care outpatient services market has declined. Part of the reason, health advocates say, is that physicians are reluctant for financial reasons to increase their numbers of Medicaid patients and uninsured patients.

Specialty services encounters at ConnectCare dropped 36 percent from 2009 to 2011, according to the St. Louis Regional Health Commission, even though these encounters experienced steady growth or remained stable at other safety net sites.

According to the commission, appointment availability for non-urgent patients at ConnectCare in recent years has improved for some specialties such as general surgery, nephrology, orthopedics and pulmonology, but has worsened for others. For instance, the average wait for a non-urgent appointment to see a urologist at Connect Care was 11 weeks from 2010 to 2012; the average wait to see a neurologist or cardiologist was nine weeks; the average wait to see a gastroenterologist was five weeks.

Steve Lipstein, chief executive of BJC Healthcare, said ConnectCare’s downsizing illustrated “the fragile nature” of St. Louis’ health care safety net for the poor.

St. Louis Regional Medical Center’s closing in 1997 catalyzed local health care providers and city officials to form a consortium to address the issue of access to care, which led to the establishment of ConnectCare.

In recent years, St. Louis city has provided as much as \$5 million a year to help sustain ConnectCare, but that money is now being distributed more widely among safety net providers such as community health centers.

“My health director, Pam Walker, and I have been warning the public and state legislators that the State’s failure to improve, reform and expand Medicaid would have real consequences for real people,” St. Louis Mayor Francis Slay said in a written statement. “Unfortunately, it is coming true. Hospitals have started to lay people off. Now, this from ConnectCare. It will mean sick people will have less access to specialty health care.”

He said the city would continue to provide funding to safety net institutions.

“Everyone wrings their hands over the fact that in a community of this size we can’t find the money to do it,” Eskridge said. “The money is just not there.”